

Maple Producer - Voluntary Registration Form

(per RSA 429:13-a, Registration)

Check One:

☐ New Registration

☐ Renewal Registration

Farm or Business Name: _____

Owner or Operator's Name: _____

Farm or Business Address:

Street _____

Town _____ State _____ Zip Code _____

Mailing Address (if different from above): _____

Farm or Business Telephone Number: _____

Check either or both boxes as applicable:

☐ **“Commercial Sugarmaker”** - means a person who collects or purchases maple sap for maple production and sale.

☐ **“Maple Packer”** - means a person who purchases and packs or further processes maple syrup for sale.

Please return this form by mail or deliver to:

NH Dept. of Agriculture, Markets & Food
Division of Regulatory Services
25 Capitol Street
PO Box 2042
Concord, NH 03302-2042

Or Fax to:

Division of Regulatory Services
603-271-1109

Or Email to:

runcles@agr.state.nh.us